## **Community Stewards Application**

Individual/Group Name:					-	
Contact Name	e:				3	
Phone:		Email:				
Mailing Addr	ess:					
City:			State:	Zip code:		
Faculty Advis	or (Student Groups	Only): Name: _				
Email:	Email: Phone:					
-	cion(s):					
for two (2)	o perform a minii	ny group/orga	nization is unab		f our adopted section s commitment I/we	
Signed:				Date:		
Cost will be ogroup name addresses or	determined at th for placement or	e time of prod n the sign. Onl a limit of 3 line	uction. Please pr y text is permitt	rint legibly the o	cost by participants. desired individual or no phone numbers, ng spaces, and a total	
Sign text:						
FOR CITY USE Received:	ONLY: // By:		Bulk Section(s): _			